

Enrollment Contract

Date_____

Child's Name_____ Birthdate_____

Guardian(s)_____

Address_____

Home Phone_____

Parent #1 _____

Parent #2 _____

Cell Phone _____

Cell Phone_____

Email _____

Email _____

Work _____

Work _____

Start Date_____

Enrolling in:

Part-Time Program

Infant Room_____

Preschool AM_____

Toddler _____

Preschool PM_____

Toddler II _____

Before School_____

Preschool _____

After School _____

Approximate Hours of Care Drop Off_____

Pick Up_____

Deposit Amount_____+\$75.00 registration fee=_____

Check Number_____

The undersigned have read, understood and agreed to the terms and conditions of the parent handbook as outlined in the 2008 edition.

Guardian

Willow Ridge Academy, Inc.

Date_____